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1c944 U.S. PTO

06 - 04 - 01
ASSISTANT COMMISSIONER FOR PATENTS
Washington, DC 20231

A
PATENT
Date: June 1, 2001
File No. 2017.64648

Sir:

Transmitted herewith for filing is the patent application of

Inventor(s): Fort et al.

I hereby certify that this paper is being deposited with the United States Postal Service as Express Mail in an envelope addressed to: Asst. Comm. for Patents, Washington, D.C. 20231, on this date.

06-01-01
Date

EL 846165555 US
Express Mail Label No.:

For: A SECURE MOUNTING ASSEMBLY FOR
A RETAIL PRODUCT DISPLAY

09/872230
06/01/01

Enclosed are:

- (X) 20 pages of specification, including 24 claims and an abstract.
- (X) an executed oath or declaration, with power of attorney.
- () an unexecuted oath or declaration, with power of attorney.
- (X) 1 sheet(s) of informal drawing(s).
- () sheet(s) of formal drawings(s).
- () Assignment(s) of the invention to .
- (X) Assignment Form Cover Sheet.
- (X) A check in the amount of \$ 40.00 to cover the fee for recording the assignment(s) is enclosed.
- () Information Disclosure Statement.
- () Form PTO-1449 and cited references.
- () Associate power of attorney.
- () Priority Document.


Fee Calculation For Claims As Filed

a) Basic Fee \$ 710.00
b) Independent Claims 7 - 3 = 4 x \$ 80.00 = \$ 320.00
c) Total Claims 24 - 20 = 4 x \$ 18.00 = \$ 72.00
d) Fee for Multiple Claims \$270.00 = \$

Total Filing Fee \$ 1,102.00

- (X) Applicant(s) qualifies as a Small Entity, reducing Filing Fee by half to \$ 551.00
- (X) A check in the amount of \$ 551.00 to cover the filing fee is enclosed.
- () Charge \$ to Deposit Account No. 07-2069.
- () Other .
- (X) The Commissioner is hereby authorized to charge any additional fees which may be required to this application under 37 C.F.R. §§1.16-1.17, or credit any overpayment, to Deposit Account No. 07-2069. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 07-2069. A duplicate copy of this sheet is enclosed.

Suite 2500
300 S. Wacker Drive
Chicago, Illinois 60606
(312) 360-0080

By: 
Paul G. Juettner
Registration No. 30,270